

# How to Handle an Emergency

Even the best plans can fall apart. Accidents will happen. People will become sick. You might be the person who is most able to take charge of an emergency scene. Here is how you should proceed.

## Do Your Best

Good Samaritan laws legally protect anyone making a good-faith effort to help the victim of an injury or illness. Whenever you are confronted with a first-aid emergency, use your skills to the best of your ability and training. No one expects you to have the knowledge of a physician. However, Scouting's history is filled with stories of Scouts who used their training to help others, sometimes even saving lives.

## 1. Check the Scene

The site of an accident can be confusing, especially when serious injuries have occurred or there is more than one person involved. There are a number of things to consider. The hazard that caused the accident may still pose a threat. Seeing blood, broken bones, vomit, or people in pain might disturb bystanders and those trying to provide first aid (first-aiders).

Before you take any action, stop for a moment to look over the entire scene and collect your thoughts. Consider the following questions:

- What caused the accident?
- Are there dangers in the area?
- How many victims are there and how badly are they injured?
- If there are other people nearby, can they assist with first aid or with getting help?
- Will bystanders need guidance so that they do not become injured or ill themselves?

## 2. Call for Help

Should you encounter a situation where someone has more than a minor illness or injury, act quickly to get emergency medical help. You can reach emergency services in much of the United States by calling 911. Some communities use other emergency-alert systems such as dialing 0 or calling a local sheriff's office or fire department. Instruct a bystander or another first-aider to call for help immediately: *"You, call for help right now. Tell them where we are and what has happened, then report back to me."*

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Mobile phones are unreliable in wilderness areas. If you take a mobile phone on an outing, have a backup plan for summoning emergency assistance.

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A wilderness camping trip can take you far from telephones. An injured Scout who can walk on his or her own or with some support may be able to hike to a road. A group of Scouts may be able to build a stretcher and carry a victim. For serious injuries, though, it is usually best to treat the victim at the accident site—provided that doing so would not further endanger the victim or the first-aiders—and send two or more people for help.



Write a note containing the following information and send it with the messengers:

- Location of the victim
- Description of the injuries or illness
- Time the injuries or illness occurred
- Treatment the victim has received
- Number of people with the victim and their general skill level for first aid
- Requests for special assistance or equipment, including food, shelter, or care for nonvictims

Activities on open water sometimes take people far from any help. Larger boats often have radio equipment that can be used to summon aid. When phones or radios are not available, however, passengers will need to make and carry out a plan for getting help. Such a plan might involve sending two people to the closest telephone to call for help.

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See “First-Aid Supplies and Skills” for information on how to build an improvised stretcher.

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## In Case of Emergency

Many people carry mobile phones these days, but not everyone carries details of whom should be called on their behalf in case they are involved in a serious accident. If you add the acronym ICE—for “In Case of Emergency”—as a contact in your mobile phone, emergency workers can quickly find someone to notify about your condition. Ask your parent whom to list as your ICE contact.

### 3. Approach Safely

After assessing the situation and summoning help, determine the best way to reach the injured person or persons. Perhaps an accident victim is lying on a busy highway or has fallen and tumbled partway down a mountainside. Will you also be in danger if you dash onto the highway or rush down the slope? Figure out a safe way to approach the victim or to remove the dangers from an area. *Do not become an accident victim yourself.*



Once you have figured out the safest way to approach, introduce yourself to injured persons and to bystanders. Assure them that medical professionals have been called and are on the way. Speaking in a calm voice, explain that you are a Scout trained in first aid and that you are there to help. Ask victims if they will allow you to assist them. If the victim is unconscious, you have “implied” consent to help them. If people are with an unconscious victim, be sure to tell them what you plan to do. If the victim is under 18, always get permission from a parent, guardian, or adult, if one is present. Continue to speak to injured or ill persons as you administer first aid, keeping them informed of what you are doing. A person may appear to be unconscious but may still be able to hear you.



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See “First-Aid Supplies and Skills” for precautions to be taken when moving accident victims.

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## Triage

Emergency situations involving more than one victim can require *triage* (pronounced *tree-ahge*)—quickly checking each victim for injuries or symptoms of illness and then determining how best to use available first-aid resources. In its simplest form, triage occurs whenever first-aiders approach an emergency scene that involves two or more persons who are injured or ill. Once on the scene, medical professionals will determine who requires urgent care, who can be treated later, who needs to be monitored in case his or her condition changes, and who is well enough to help out.

Sometimes a victim's location threatens his or her safety and that of first-aiders. For example, suppose you are out hiking and a buddy falls into a stream or gets hurt while on an unstable boulder field or avalanche slope. It might be necessary to move the victim to a safer location before first-aid treatment can begin. To do this, get the help of others in your group and lift the victim in the same position as found. Once carried to safety, the victim should be laid down gently. (See "Moving an Ill or Injured Person" later in this pamphlet.) Take special care to prevent the victim's neck from moving by supporting the head before, during, and after the emergency move.

**Remember:** Do not move the victim unless you absolutely have to for safety reasons.

## Protect Yourself

It is impossible to know for sure if the victim has any diseases. Professionals such as EMTs (Emergency Medical Technicians) and paramedics practice something called Universal Precautions. You should too. Consider all body fluids to be infectious. Minimize contact with them by wearing nonlatex gloves and, if you might be splashed by blood, vomit, or other body fluids, also wear a protective mask and eye shield. Your sunglasses, rain gear, and bandana or neckerchief (over your mouth and nose) would work if nothing else is available and you feel you might need it. (See "Protection From Bloodborne Pathogens.")

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If the person is breathing, the breaths should not be irregular or shallow or short; the person should not be gasping for air.

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## 4. Provide Urgent Treatment

*Breathing and bleeding*—these are your immediate concerns when treating the victim of an accident or illness. Victims who have stopped breathing or who are bleeding severely are called *hurry cases* because their lives are in immediate danger. They require smart, timely action on the part of a first-aid.

Whenever you come upon an injured person, take no more than 15 to 20 seconds to do a quick survey of his or her condition to find out the following:

- *Is the person conscious and breathing?* If he or she seems to be unconscious, tap the person on the shoulder and ask (or shout) if he or she is all right. If the person does not respond, stabilize the head and neck if you suspect injuries

and perform compressions-only CPR if the person is not breathing. Then place your ear near the mouth and nose where you can hear and feel the movement of air. Watch for the chest to rise and fall.

- *Is there severe bleeding?* Open rain gear and outer clothing that might hide wounds from view. Quickly look and feel under the body and legs for bleeding.
- *Are there other contributing factors?* Look for a medical ID bracelet, necklace, or card that might give information about allergies, diabetes, or other possible causes of an emergency situation. Persons who have asthma or allergies to insect stings or certain foods (such as peanuts) might carry treatment for their condition.

See “Life-Threatening Emergencies” for more details.

## 5. Protect From Further Injury

An important part of first aid is protecting an accident victim from further injury. Follow these guidelines.

- Avoid moving an injured person unless his or her body position makes it impossible to perform urgent first aid or he or she is in a dangerous location. If a person’s position must be adjusted, for example, to allow them to breathe, do so with the minimum amount of movement.
- Stabilize the victim’s head and neck to prevent any neck bones that may be broken from damaging the spinal cord. Ask a fellow first-aider or a bystander to hold the victim’s head and neck steady to keep the neck in proper alignment.



While awaiting emergency personnel, support the victim’s head in the position you found it, in line with the person’s body.





## 6. Treat Every Accident Victim for Shock

The circulatory system of a person who is injured or under great stress might not provide enough blood and oxygen to the tissues of the body. This condition is called *shock*, and it can be deadly (as organs can begin to fail). A shock victim can have some, all, or none of the following symptoms:

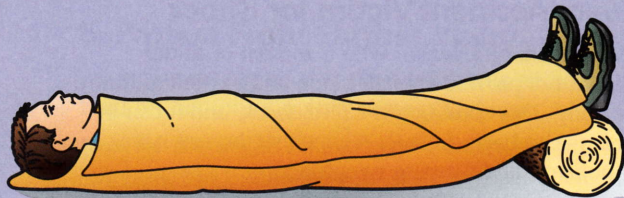
- Restlessness or irritability
- A feeling of weakness
- Confusion, fear, dizziness
- Skin that is moist, clammy, cool, and pale
- A quick, weak pulse
- Shallow, rapid, and irregular breathing
- Nausea and vomiting
- Extreme thirst

Serious injuries and sudden illnesses are almost always accompanied by some degree of shock, but the victim might not be affected right away. Treat every accident victim for shock even if no symptoms appear. Prompt first aid may prevent shock from setting in.

Fear and uncertainty can increase shock. In a calm voice, assure the person that everything possible is being done and that help is on the way. A person who appears to be unconscious may still be able to hear you. Never leave an accident victim alone unless you must briefly go to call for help.

## First Aid for Shock

1. Try to eliminate the causes of shock by restoring breathing and circulation, controlling bleeding, relieving severe pain, and treating wounds.
2. Call or send someone for help.
3. Monitor the victim closely to make sure the airway stays open for breathing.
4. If the victim is not already doing so, help the injured person lie down. If you do not suspect back, neck, or head injuries, or fractures in the hip or leg, raise the feet about 12 inches to move blood from the legs to the vital organs.
5. Keep the victim warm with blankets, coats, or sleeping bags.



## 7. Make a Thorough Examination

By the time you have dealt with urgent conditions and provided treatment for shock, medical professionals are likely to have arrived. When their arrival is delayed or the location will require greater travel time, conduct a more thorough examination to be sure you have found all the victim's injuries that require attention. If the victim is alert, ask where it hurts and whether the victim can move the arms, legs, and so on.

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Look beneath jackets and other clothing that could obscure or hide wounds that are bleeding.

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## Look for DOTS

As you make this secondary examination of the victim from head to toe, check for:

- D = Deformity**
- O = Open wounds**
- T = Tenderness**
- S = Swelling**



## 8. Plan a Course of Action

After conducting the examination, determine what to do next. The best course of action in most cases is to make the victim comfortable and continue to wait for medical help to arrive. Maintain treatment for shock, keep the airway open, monitor the victim for any changes, and be ready to provide any other treatment the victim might require.

In the backcountry it may be wise to set up camp and to shelter the victim with a tent. Rather than lifting a badly injured person into a tent, you can slit the floor of a standing tent and then place the tent over the person.

Be aware of your own needs, too, and those of others around you. Stay warm and dry. If a first-aid emergency lasts very long, be sure to eat and drink enough. Be aware that other group members may be frightened or disoriented by what they have seen. Be sure they do not wander off. Giving people specific responsibilities—fixing a meal or making camp, for example—can focus their attention and help keep them calm.



**Learn all the first aid you can and review it often. Perhaps one day you will be able to do just the right thing at a time when your actions make all the difference.**